

IMAC-IT Subcommittee Meeting Minutes

11/13/03

Present: Jim Jones, Deb Bigler, Evie Ryan-Tondryk, Dave Hippler, Laurie Teubert, Bill Blank, Tony Sis, Bob Martin, Ken Funck, Pam Waffle, Bernadette Connolly, Stacia Jankowski, Melissa Otter, Jane Wanless, Jill Jokela, and Sara Martin.

By Teleconference: Luann Page and Diane Peterson.

Recorder: Tony Sis

The meeting minutes from 10/9/03 were approved as written.

Newborn processing.

Duplicate files are being created for newborns causing two pseudo social security numbers. This is causing duplicate payments to HMOs. This needs to stop. There are three proposals being considered.

1. EDS through MMIS would build a query in a master index to assign a PIN. The local worker would match this PIN in clearance.
2. EDS would contact the local agency with the newborn information and the agency would have to add the baby onto a case quickly. The contact would probably be the CARES coordinator.
3. CAPO would the report from EDS and do the baby add for MA only.

The group preferred proposals one or two.

Hospitals will no longer be able to forward files to EDS without a name for the child. There are about 1,400 baby adds per month. Forty to fifty percent already have an existing case. It was also suggested that workers have their E-mail address on SMUM so that the information could be directed to the worker, when known.

October CARES changes.

The state will be able to intercept taxes to repay Job Access Loans. The number of Bendex matches will be bigger this November or December as preparation is done for COLA updates. Food Stamp benefits are no longer being converted to coupons when a customer moves to another state. EFAD was added to the driver flow when eligibility is run for Food Stamps. Enhancements were made to the AFEI driver flow.

It was noted that there would be updates in December regarding new BadgerCare verification requirements. Notices will go out in December regarding new BadgerCare premium amounts.

Jill noted that ED/BC is undergoing major behind the scene changes. This will save money on transaction costs and should be faster. A DXBM will be coming out regarding this.

Update on Medicaid Notice 'Roll-Up'.

Revised notices will be shorter and combine MA into 5 main categories. Information regarding this will be relayed to workers via a DXBM or an Ops memo. There will be changes to CNHS as well. Individual triggers for suppression will also be combined. Only total MA can be suppressed. The target date for implementation is in January.

It was noted that the budgets will include which individuals and AG types are open. Med. status codes will still exist. An updated list of the codes is being worked upon. The question came up about deleting people who are code 15 on ANLA. In application mode, they can be deleted from ANID before SFEX is run for the case.

Update on SAVE.

Stacia stated that SAVE is going to a Web based version on 12/22/03. Workers will be able to do queries and request secondary queries online. There will be enhanced functionality. Users will be able to pull up the status of their requests. Security will have three levels;

1. Super user- one or more per agency. This could be the state.
2. Supervisor- this is at a department level. They could terminate user and get reports.
3. User- they would have some functionality for their own information and cases.

There are still issues including where the security will reside, ID, passwords, and implementation. Security forms are still an issue.

Usage for SAVE seems to vary greatly. It was agreed that it would be good for supervisors to have the ability to reset passwords.

SAVE may be able to be added to future CARES capabilities.

Usage numbers for SAVE are only available on a county level and not by individual worker. Rollout of the Web version could be gradual with supervisors picking who should received access first.

There will be a 3-month overlap between the old and new systems.

Local Agency Feedback on the Automated Case Directory.

Handout of ACD usage by report for October 2003.

The following items were submitted as ACD issues. Some of them can be addressed, some in a future version of the software, and some are not possible.

Report Prompt Screen.

There should be a field next to each prompt allowing for direct entry of a prompt such as 13, 5513, 0144, or xda243. This screen should also have the ability to hold a setting so that entries are not required multiple times when doing reports for the same worker, office, etc.

Report Navigation Menu

Supervisory Unit should be an active field so that information can be looked up by Supervisory Unit instead of one worker at a time or have the drill for Supervisory Unit give totals for the unit instead of the individuals.

General Report issues

There should be case totals for all selected reports or drills. The total should be in the white header section. Having a total at the end of the report requires time paging through the report. The worker should be able to enter all drills before the report is refreshed. Currently the report will refresh after each item is changed in the drill.

Report #2 Office Caseload Summary

Need the ability to drill by supervisory unit.

Report #3 AG Detail Listing by Worker

Need to have a drill for all MA categories at once.

Report #4 AG Individual Listing by Worker

This report should be sorted by primary person or have the ability to switch the sorting.

There needs to be an earned income drill. Yes, No, All.

There needs to a drill for all MA.

Report #6 Case Mailing List by Worker

Need the capacity to set a mailing list for a supervisory unit.

Report #8 New, Ongoing, and Dropped Cases by Worker

Have definitions of new, ongoing, dropped.

Report #9 Review Month Listing by Worker

Need a drill for all MA categories at once.

Report #10 Lack of Review Closure Listing by Worker

Sort by primary person or have the ability to change the sort.

Report #11 Pregnancy Listing by Worker

Need a drill for pregnancy past the due date and perhaps just about due.

Report #12 WP Exemption Reason Report by Worker

12 and 14 could be combined. Call the report WP referral status?

Report #13 Living Arrangement Listing by Worker

We don't need it broken down by AG and living arrangement. The living arrangement should be the same for all programs.

Report #14 WP Non-Exempt Indivs by Worker

Combine with 12. Have a drill for exempt, mandatory, and volunteer.

Report # 15 Child Care Indivs by Worker

Sort by primary person or have the ability to change the sort.

Show the dates for the authorizations. Have the ability to drill down to expired or current authorizations. Include the number of hours per week authorized per child.

Include definitions for each of the child-care activity codes.

Ken noted that reports 1, 3, and 5 are closest to the written case directory. Report 2 would be like the second part of the old directory. He noted that there are some limitations to the software that was bought by the state. There will be a new version in February and the interface will change.

Diane thought that the ACD would be more of a supervisory tool, some of the current numbers are from training, and that usage would level off.

Web initiatives.

Deloitte is looking at the overall vision for Client Registration and Application Entry. Data analysis is being done concerning what data elements should be included. Work is proceeding on intelligent driver flows. Web pages are being developed and grouped together for efficiency. They are in the process of designing page layout and appearance. Mockups will be brought to the group for feedback.

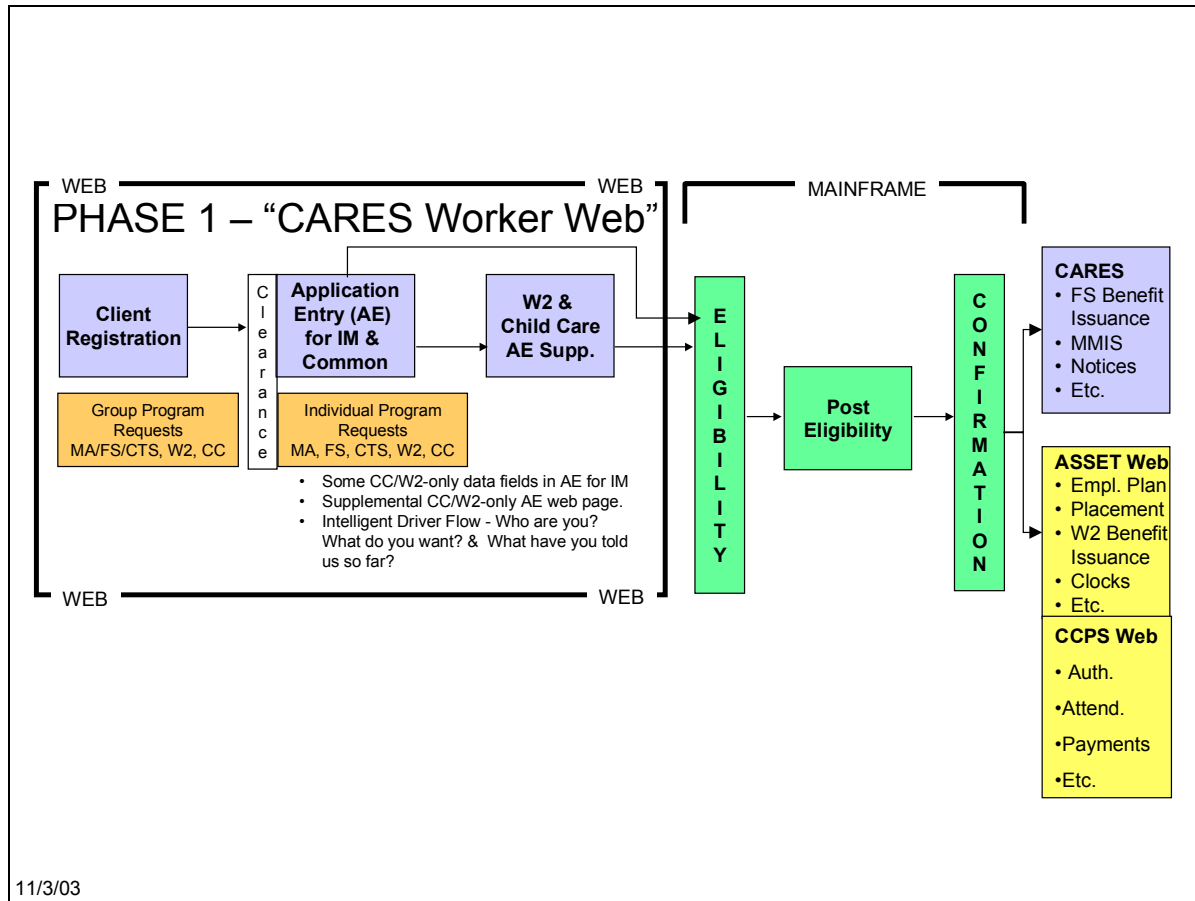
A survey was sent out to all CARES coordinators that is due 11/21 with information about each physical office. There will be a group that will meet and analyze the data. Site visits will be done to several offices to check the physical layout.

Intelligent collection of data will be used in CARES based on the requests for programs.

The page controller concept will be used. Pages will be required, complete, not required, or protected. There will be a left-hand navigation bar. TRAN codes will no longer be needed.

There will be visual cues such as checks or color codes for the status of the pages. The number of pages and questions will be greatly reduced by the intelligent flows. There will be the ability to jump to any screen. There will be summary screens of income, assets, etc.

We are currently in phase one of the Webification of CARES.



CARES ‘Big Picture’.

Handout: DHFS & CARES, An Updated Strategic View of CARES.

This is intended as a four to five year plan. There will be multiple access points (doors) to CARES. The doors include the IM agency, resource center, the Internet, CAPO, and Regional Change Centers. There will be icons on the desktop to take the worker to various functions. We want to get the worker out of the business of data entry and back to case management.

The new worker desktop will have one ID with one password for multiple applications.

Help and Tech. assistance will have online handbooks that are text sensitive. There will be page help and what to do in a particular process beyond what is needed in CARES.

The training environment will be improved with real simulation and the ability to test and train in pre-production.

Electronic case files will be indexed by case number and PIN.

Scanning of forms into case files will be done by CAPO, regionally, and at the local agency level.

Pathlore Learning Management Systems will be used for training. There will be more pre-testing and post-testing to determine the current knowledge of the workers and the effectiveness of the training.

Intelligent driver flows will save on transaction costs when they are in place in the future.

CARES Worker Wish List.

This item was deferred to a future meeting.

Next meeting 12/11/03. DHFS Building- 1 West Wilson St.- Room #672.

Items included at the next meeting are scanning, MA notices, and BadgerCare Employer Verification.